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Glamorgan County Council.



REPORT

OF THE

Medical Officer of Health

FOR THE YEAR 1943.

A. R. CULLEY, M.D., B.Ch. (Wales), B.Sc., M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.,
MEDICAL OFFICER OF HEALTH.



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CARDIFF:

WILLIAM LEWIS (PRINTERS) LIMITED.

Glamorgan County Council.

To the Chairman and Members of the Public Health and Housing Committee.

MR. CHAIRMAN, COUNTY ALDERMAN MRS. F. ROSE DAVIES, AND GENTLEMEN,

ANNUAL REPORT, 1943.

I have the honour to present to you my second Annual Report.

At the request of the Ministry of Health, certain statistics, usually found in annual reports of Medical Officers of Health, are not included for Security reasons.

The birth rate for 1943 remains almost the same as 1942, being 18·4 and 18·2 per 1,000 respectively. The death rate has increased but very slightly from 12·1 per 1,000 in 1942 to 12·4 in 1943. The infant mortality rate remains almost at last year's low record figure of 55 per 1,000 births—namely, 56 per 1,000 births. The maternal mortality rate has unfortunately increased from 3·39 to 4·67 per 1,000 (live and still) births. The stillbirth rate has dropped from 38·86 in 1942 to 34·53 per 1,000 (live and still) births. The number of deaths from tuberculosis (all forms) has increased from 541 in 1942 to 573 in 1943. The number of persons dying from cancer was exactly the same as for 1942, i.e. 1080.

The County Council's hospitals again showed a year of great activity under conditions not less difficult than the previous year, and the hospital staffs are to be complimented upon their successful efforts to maintain the efficiency of the service.

The Midwifery Service has maintained its activities, in spite of adverse war conditions, in a manner which is gratifying. Transport difficulties have varied during the year and will remain so, in all probability until the war is over.

I regret to report that during the year the Committee lost, by the death of Dr. Bevan Llewellyn, an excellent officer, and patients of his have written to me stating how much they have missed him.

Dr. W. Evan Thomas, who was appointed to the office of Deputy County Medical Officer at the end of 1942, took up his position early this year. He has taken much of the responsibility of the Casualty Services and given me great assistance in most aspects of the work of the Department. I am grateful to the District Medical Officers, W.V.S. Transport Officers, and the large number of members of the Casualty Services for their great help and support. The County Ambulance Officer and his assistants have given excellent service during the year.

The Assistant Medical Officers have been active in carrying out their duties for this Committee in addition to work in the School Medical Service.

The members of the Administrative Staff have had a most difficult year, and but for their great efforts in face of the loss of a large proportion of permanent staff the efficiency of the Department would have severely suffered. My sincerest thanks are due to them.

Finally, may I express my gratitude to the Committee who, I believe, have recognised that the work during the year has been performed under great stress, and for their constant support in all matters appertaining to Public Health.

I remain,

Your obedient servant,

A. R. CULLEY,

County Medical Officer.

July, 1944.

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VITAL STATISTICS, 1943.

The following table gives the birth rate, death rate, and infant mortality rate for England and Wales and the Administrative County of Glamorgan for the year 1943, and, for the purpose of comparison, similar statistics for the years 1942 and 1923 are given.

	Birth Rate.			Death Rate.			Infant Mortality Rate.		
	1943	1942	1923	1943	1942	1923	1943	1942	1923
England and Wales	16·5	15·8	19·7	12·1	11·6	11·6	49	49	69
Administrative County of Glamorgan ..	18·4	18·2	23·4	12·4	12·1	10·5	56	55	75
Total Urban Districts	18·4	18·5	23·7	12·9	12·5	10·7	57	56	76
Total Rural Districts	18·3	17·6	22·4	11·2	10·9	9·5	52	53	70
URBAN DISTRICTS :—									
Aberdare	15·6	15·1	21·7	14·4	13·6	11·0	44	66	77
Barry Borough	20·3	19·3	21·9	11·8	12·0	10·7	40	50	78
Bridgend	16·8	16·2	22·0	11·2	13·2	10·2	35	34	53
Caerphilly	20·6	20·1	26·6	13·5	11·3	10·9	75	64	92
Cowbridge Borough	17·0	16·9	17·4	13·8	19·4	10·4	48	95	50
Gelligaer	22·0	21·8	24·8	12·1	11·4	10·1	77	57	89
Glyncorrwg	23·2	23·6	27·2	11·3	12·2	10·2	45	62	79
Lluchwr	18·1	19·5	21·0	11·5	11·6	10·1	41	41	69
Maesteg	19·9	20·1	26·5	12·9	11·4	10·1	81	61	70
Mountain Ash	18·1	18·6	24·6	13·7	13·1	10·1	46	46	72
Neath Borough	14·5	16·1	21·1	12·2	11·9	11·0	70	60	64
Ogmore and Garw	20·7	18·7	25·6	11·6	11·3	8·7	54	58	59
Penarth	17·4	15·9	20·5	13·0	12·3	10·2	49	40	46
Pontypridd	18·5	18·4	25·0	13·0	13·5	11·8	69	61	65
Porthcawl	17·6	15·6	20·5	12·2	12·9	9·5	57	34	59
Port Talbot Borough	18·3	19·8	23·9	13·2	11·7	10·6	58	45	73
Rhondda	17·3	18·0	23·2	13·6	13·2	11·2	55	63	86
RURAL DISTRICTS :—									
Cardiff	17·0	15·2	17·8	10·9	9·9	9·6	31	36	78
Cowbridge	22·5	21·5	24·0	11·9	13·0	10·1	62	53	59
Gower	16·2	16·8	17·9	12·0	11·0	9·2	53	55	59
Llantrisant and Llantwit Fardre ..	19·3	20·2	27·4	10·6	10·1	10·2	42	38	74
Neath	17·8	17·7	24·6	11·2	11·7	10·9	60	73	78
Penybont	19·5	17·4	22·6	9·8	9·5	8·7	60	54	57
Pontardawe	17·8	16·8	20·8	12·9	12·3	10·1	60	53	78

EXTRACTS FROM VITAL STATISTICS.

The following is a short extract from the Vital Statistics of the year 1943 :—

<i>Live Births :</i>				<i>Total.</i>	<i>Male.</i>	<i>Female.</i>	
Legitimate	..	..		12,244	6,277	5,967	{ Birth rate per 1,000 of population, 18·4
Illegitimate	..	..		560	276	284	
<i>Stillbirths</i>	..	..	..	458	245	213	{ Rate per 1,000 total (live and still) births, 34·53, or 0·66 per 1,000 population.
<i>Deaths</i>	..	..	..	8,679	4,890	3,789	{ Death rate per 1,000 of population, 12·4.
<i>Deaths from Puerperal Causes :</i>					<i>Deaths.</i>		<i>Rate per 1,000 total (live and still) births.</i>
Puerperal and Post Abort: Sepsis					19		1·43
Other Maternal Causes				..	43		3·24
Total				..	62		<u>4·67</u>
<i>Death rate of Infants under one year of age :</i>							
All infants per 1,000 live births				..	..	..	56
Legitimate infants per 1,000 legitimate live births				..	..	..	55
Illegitimate infants per 1,000 illegitimate live births				..	..	..	75
<i>Deaths from Certain Causes :</i>							
Cancer (all ages)				..	..	..	1,080
Measles (all ages)				..	..	..	23
Whooping Cough (all ages)				..	..	..	20
Diarrhoea (under 2 years of age)				..	..	..	56

MILK PRODUCTION.

The results of sampling of milk produced under licence of the County Council as the Authority under the Milk (Special Designations) Orders, 1936-1938, is shown in the following table :—

Grade	1942		1943	
	% Satisfactory	% Unsatisfactory	% Satisfactory	% Unsatisfactory
Tuberculin tested ..	79	21	78	22
Accredited	75	25	74	26

There has been no improvement in milk production as far as one can judge. It must be recognised that milk producers have difficulties associated with war conditions and these undoubtedly have played a part in the results obtained.

Certain producers who had given three consecutive bad samples were reported to the Committee and in ten instances the licences were not renewed. The penalty in some of these cases was a loss of bonus for the period which elapsed for resampling to be done to see if they could produce milk up to the standard required by the Order. Last year it was reported that pasteurised samples had shown evidence of deterioration due to overloading of pasteurising plants and this position has improved.

The Ministry of Food held meetings with milk producers to discuss with them the Government White Paper on "An Improved Milk Supply." It is intended that in urbanised areas where rationalisation of milk distribution has been arranged to specify areas where the Ministry is satisfied that facilities exist for the heat treatment of milk, in which only tuberculin tested milk, accredited milk from a single herd or pasteurised, sterilised or heat treated milk can be retailed.

It is difficult to understand, on public health grounds, why accredited milk from a single herd is placed amongst the favoured classes of milk.

One repercussion is that milk producers desiring to sell this class of milk have also shown a desire to be permitted to produce it without fulfilling the Committee's regulations as to the provision of steam sterilising plants as there is delay in obtaining them. The Committee, however, have firmly held that the regulation must be maintained.

The Government also proposes to remove from the ambit of Local Authorities the supervision of milk production and to place this function under the control of the Ministry of Agriculture. The work will be carried out by full-time veterinary surgeons. The supervision of the distribution of milk will remain under the control of Local Authorities, as will functions relating to infection of milk.

Whatever eventuates there is a long way to go before we can be satisfied that milk, which is being used on an increasing scale, can be considered a safe food.

CARDIFF AND COUNTY PUBLIC HEALTH LABORATORY.

Mr. J. H. Sugden, M.Sc., F.I.C., has remained in charge of the chemical work in the Laboratory, and on the bacteriological side Dr. Victor D. Allison remained in control. Both sections have worked under difficult staffing conditions and have handled an increased volume of work.

The Joint Committee has permitted an extension of facilities for biological testing which is very welcome, but we will have to await the cessation of hostilities before building can be undertaken to reach the amount of work that should be done in this respect.

The following table gives an account of the work done at the Laboratory during the year 1943 for the Administrative County :—

Description of Specimens or Samples.	Total No. examined	Results		Percentage of Positive Results
		Positive	Negative	
<i>Bacteriological Examinations :—</i>				
Water Supplies	1087	—	—	—
Milks for Tubercle Bacilli	219	10	209	4·6
Milks for General Examination	2458	—	—	—
Milk for Enteric, etc.	4	—	—	—
Water for Enteric, etc.	8	—	—	—
Sputa for Tubercle Bacilli	120	15	105	12·5
Urine for Tubercle Bacilli	70	—	70	—
Faeces for Tubercle Bacilli	11	—	11	—
C.S.F. ? T.B.	8	8	—	100
Pus and Pleural Fluid ? T.B.	59	—	—	—
Diphtheria	11553	2573	8980	22·3
Haemolytic Streptococci	1606	—	—	—
Ringworm	31	—	—	—
Sera for Enteric	69	22	47	31·9
Faeces for Enteric	165	31	134	18·8
Urine for Enteric	43	12	31	27·9
Faeces for Dysentery	227	28	199	12·3
Faeces for Food Poisoning	14	2	12	14·3
Brucella Abortus	8	—	—	—
Food for Enteric	8	—	—	—
For Wassermann Reaction	2361	357	2004	15·1
For Gonococcal Complement Fixation	630	69	561	11·0
For Gonococci	821	174	647	21·2
Ophthalmia	10	—	—	—
For Spirochaeta Pallida	38	17	21	44·7
Cerebro Spinal Fluid	107	—	—	—
Meningococci	12	12	—	100
Rodents for Plague	43	—	—	—
Other Examinations	122	—	—	—
<i>Chemical Examinations. :—</i>				
Fertilizers and Feeding Stuffs	52	—	—	—
Food and Drugs Acts Samples	1730	—	—	—
Water Supplies	152	—	—	—
River Waters	35	—	—	—
Sewage and Sewage Effluents	364	—	—	—
Trade Effluents	59	—	—	—
Milk and Milk Products	682	—	—	—
Urine Analyses	8	—	—	—
Other Examinations	9	—	—	—
Total	25003	—	—	—

FOOD AND DRUGS ACT, 1938.

During the year 1,023 samples were examined, and of these 89 or 8·7% were found to be unsatisfactory. Of this number, 607 were formal milk samples of which 56 or 9·2% were found to be adulterated or not up to the required standard.

This is a higher proportion of unsatisfactory results as compared with 1942, when adverse reports were received on 4·9% of the samples submitted. The figure of 9·2% of formal milk samples found to be adulterated is an increase of 2·2%, which is a matter of grave concern when one considers that milk is such an important article in the diet of children and emphasises the need for frequent sampling in order to ensure that this product is maintained at a high standard.

Infestation with meal mites of flour, cake mixtures, and egg substitutes account for the increase of adulterated samples other than milk. This is due to the prolonged storage of these products in warehouses and shops and not easily preventable. In no instances were rationed goods such as butter, margarine, lard, and cheese found to be adulterated.

HOSPITALS.

The hospitalisation of the sick has altered considerably of late years, there being an increased desire to go into hospital for investigation and treatment. The fear of entering hospital has steadily diminished and is continuing to do so. There seems to be little doubt that the future will see this tendency to hospitalisation increasing. Modern medicine demands, in an ever increasing amount, that scientific advance, often associated with expensive apparatus, must be available to all who are sick. The adequate investigation of a patient is imperative before scientific treatment, and in this lies the stimulation to an ever increasing demand on hospital facilities.

The number of admissions to the three acute hospitals were 11,631 in 1942 and 12,153 in 1943.

The demand for hospitalisation for "confinement" is heavy and cannot be met. The lack of relatives and neighbours, owing to engagement in war-work or the Services, to look after the mother is an important factor. In addition, it is noted that women are indicating a desire to have their babies in hospital. Restriction of admissions has had to be enforced to maintain reasonable conditions of safety.

WEST GLAMORGAN COUNTY HOSPITAL.

There were nearly 5,000 admissions to this hospital during the year. The Annexe has been of value in assisting in the reduction of the waiting list, which at the end of the year was of reasonable proportions. 1,056 maternity patients were admitted and the ante-natal clinic has been exceptionally well attended.

The Out-patient Department has performed excellent work and sessions were given to medical, surgical, ear, nose and throat, ophthalmic and skin patients.

The erection of the new Maternity Block proceeded, and the beds which will be provided, even if only the ground floor is completed, will greatly assist the area.

LLWYNYPIA HOSPITAL.

A total of 3,019 patients were admitted to this hospital during the year, which shows the endeavour by all concerned. This could not be accomplished but for the efficient use of the Out-patient Department.

The number of maternity patients were reduced from the 1942 level of 549 to 494 this year. This was due to the deliberate administrative action of restriction which became imperative in the interest of all concerned, particularly the patients themselves. However, this also means that too slender a margin is allowed in coming to a decision on admission or non-admission.

There are many difficulties associated with this hospital, an important one being the site and the disposition of ward blocks. These create much more labour for those working there.

MID-GLAMORGAN COUNTY HOSPITAL.

The admissions increased from 3,716 in 1942 to 4,183 in 1943 ; maternity patients increased again from 703 in 1942 to 818 in 1943.

The hospital buildings provide a limited accommodation and it is difficult to make much improvement until building can be resumed.

The lack of accommodation for out-patient work is acute and provides a serious problem. It is hoped that, temporarily at least, some improvisation may be possible to ease this position.

GENERAL.

The three Nursing Training Schools have maintained their excellent results, which is a reflection of the effort made by all those taking part in the tuition and on the industry of the nurses themselves.

During the year there has been a steady improvement of the medical equipment in spite of the war.

It has not been easy to obtain the services of consultants at all times but all have done what they could to help.

Church Village Hospital is still being used for the same purpose as last year. I am informed that its lay-out and facilities are very satisfactory.

The following tables show (a) The Accommodation and Record of Cases Treated at the County Hospitals and Institutions during the year 1943 ; and (b) a Record of Admissions to Maternity Departments since 1930.

(a) ACCOMMODATION AND RECORD OF CASES TREATED DURING THE YEAR 1943.

Institution.	No. of Beds (Normal).	No. of Patients admitted (including infants born in hospital).	No. discharged (including infants born in hospital).	No. of Patients in Institution on 31st December, 1943.	Total No. of Deaths.	No. of Surgical Operations performed.	MATERNITY CASES.					No. of Infant Deaths (under 1 year).
							Beds available.	Cases admitted.	No. of Live Births.	No. of Still Births.	No. of Maternal Deaths.	
Mid-Glamorgan County Hospital	207	4,183	3,984	224	194	2,220	42	818	705	36	8	19
Llwynypia Hospital ..	172	3,019	2,840	154	157	1,774	22	494	431	41	12	29
West Glamorgan County Hospital	247	4,951	4,154	246	226	2,874	48	1,056	864	44	4	32
Central Homes, Pontypridd	191	1,627	1,285	265	292	—	10	271	226	4	—	10
Penmaen Institution ..	23	55	51	14	12	—	—	—	—	—	—	—
Pontardawe Institution	44	130	86	55	43	—	1	10	2	—	—	—
Totals ..	884	13,965	12,400	958	924	6,868	123	2,649	2,228	125	24	90

(b) RECORD OF ADMISSIONS TO MATERNITY DEPARTMENTS OF COUNTY HOSPITALS AND INSTITUTIONS.

Institution.	Number of Cases admitted to Maternity Wards.											Total No. of Cases admitted.			
	1930*	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940		1941	1942	1943
Mid-Glam. County	26	54	79	136	185	277	304	287	279	339	364	565	703	818	4,416
Llwynypia ..	71	107	177	228	282	317	265	312	418	509	516	521	549	494	4,766
West Glam. County	39	61	40	66	119	187	352	432	536	583	731	862	1,069	1,056	6,133
Pontardawe ..	3	6	3	5	3	6	6	2	5	2	4	4	5	10	64
Pontypridd ..	26	33	36	39	65	38	22	24	33	54	75	153	170	271	1,039
Totals ..	165	261	335	474	654	825	949	1,057	1,271	1,487	1,690	2,105	2,496	2,649	16,418

* From 1st April, 1930.

HOUSING.

District.	By Local Authority.				By private enterprise, Building Societies, etc.		
	Number of houses completed and occupied during the year 1943.	Number partly completed during the year 1943.	Number sanctioned but not commenced.	Total number of houses completed and occupied since 1918.	Number of houses completed and occupied during the year 1943.	Number partly completed during the year 1943.	Number for which plans were passed but not commenced during the year 1943.
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
Aberdare	—	—	—	*538	1	—	—
Barry Borough	—	—	—	1,154	—	—	—
Bridgend	—	—	—	141	—	—	—
Caerphilly	—	—	—	696	—	—	—
Cowbridge Borough	—	—	—	12	—	—	—
Gelligaer	—	—	—	468	—	—	—
Glyncorrwg	—	—	—	282	—	—	—
Llwchwr	—	—	—	576	—	—	—
Maesteg	—	—	—	178	—	—	—
Mountain Ash	—	—	—	241	1	—	—
Neath Borough	—	—	*102	*823	—	—	—
Ogmore and Garw	—	—	—	210	—	—	—
Penarth	—	—	—	*129	—	—	—
Pontypridd	—	—	—	606	—	—	—
Porthcawl	—	—	—	—	—	—	4
Port Talbot Borough	—	—	—	1,195	—	—	—
Rhondda	—	—	20	285	—	—	—
Cardiff Rural	—	10	—	323	—	12	—
Cowbridge Rural	17	4	—	583	1	—	—
Gower	—	6	—	64	—	—	—
Llantrisant & Llantwit Fardre	—	4	—	850	—	—	—
Neath Rural	—	—	—	800	—	—	—
Penybont	2	8	—	865	—	—	—
Pontardawe	—	—	—	1,020	—	—	2
TOTALS	19	32	122	12,059	3	12	6

• Including Flats.

TREATMENT OF VENEREAL DISEASES.

The County Council provides three clinics, ie. Pontypridd, Port Talbot, and Barry, and in addition arrangements are made with the Swansea General Hospital and the Cardiff Royal Infirmary to treat patients from its area.

From the figures obtained in the early part of the year it appeared that there would be a marked increase in the number of new patients suffering from syphilis. This did not eventuate, and taking new County patients suffering from syphilis attending at all the above-mentioned centres the increase is but 17 over the 1942 figure—206 as against 189. The number of new patients suffering from gonorrhoea dropped from 421 in 1942 to 363 in 1943. As mentioned in the last report, this is probably not an indication of a lessened incidence but rather the result of the increased use of new drugs in the treatment of this condition by general practitioners whose patients, before the introduction of these drugs, would have been treated at clinics.

An interesting point to notice in the statistics is the marked increase in the number of patients attending who were found to be "non-venereal." These numbered 270 in 1942 and 567 in 1943. This is likely to be the result of propaganda relating to venereal diseases. There was a press campaign and also one organised by the Committee.

The disturbing feature is the youthfulness of some of the patients who attended.

LOCAL PROPAGANDA.

The Committee decided to organise a propaganda campaign and the first step taken was to call a conference of all the District Councils. It was suggested to the representatives that a small propaganda Committee be created in each district composed of members of the District Council and the County Council, and that this Committee should convene a meeting of all persons interested in various local organisations. This meeting should be addressed and an appeal made that the representatives present should apply for lectures for members of their own organisations to the District Medical Officer of Health, who was to act as secretary for the local propaganda Committee. The conference agreed to this scheme. To provide lecturers, the District Medical Officers of Health were invited to join a panel of lecturers in addition to Medical Officers of the County Council. A meeting of the panel was called and the general outline of the type of lecture agreed upon.

The result was that during the winter over 140 lectures were given to well-attended meetings. Unfortunately not all District Councils co-operated, but in any case the amount of work was found to be fairly arduous.

Deep thanks are due to the District Councils who co-operated and to the panel of lecturers who gave their services without cost to the Authority.

REGULATION 33B.

This Regulation was introduced towards the latter part of 1942. It gives power to enforce examination and, if necessary, treatment of persons who have been nominated by at least two persons as being the source of their infection. The value of the Regulation is, of course, limited, but it is an important advance if it be a forerunner of further legislation.

It was soon obvious that unless action could be taken on the receipt of information from the first source a good deal of infection could be conveyed and opportunities of early treatment missed.

In spite of the delicacy of the legal position the Committee agreed towards the end of the year that the Department could take informal and advisory action on the first notification. A little later the Minister of Health declared that under certain powers he possessed, the information obtained through the operation of Regulation 33B could be utilised to trace contacts and thus the position was placed on a proper basis.

The results of the operation of this Regulation during the year were as follows :—

<i>Regulation 33B.</i>										<i>Male.</i>	<i>Female.</i>
(1)	Total number in respect of whom Form 1 was received	..	..							4	79
(2)	Number in (1) in which attempts were made outside the scope of the Regulation to persuade the contact to be examined before the latter had been named on a second Form 1	..	..	..						1	8
(3)	Number of those in (1) in respect of whom a second Form 1 were received	..	..	..	..	..	..	..	..	—	6
(4)	Number in (3) who were—										
	(a) Found	..	..	..	..	..	..	..	..	—	6
	(b) Examined after persuasion	..	..	..	..	..	..	..	..	—	4
	(c) Served with Form 2	..	..	..	..	..	..	..	..	—	2
	(d) Examined after service with Form 2	..	..	..	..	..	..	..	..	—	2
	(e) Prosecuted	..	..	..	..	..	..	..	..	—	Nil

Owing to the clarification mentioned above the position should appear much different in the next Report. One of the obvious difficulties is the receipt of information which gives sparse details and renders identification impossible in some cases.

The comparative figures for new cases coming under clinic treatment are shown below :—

Year	Syphilis	Soft Chancre	Gonorrhoea	Cases other than Venereal	Total
1927	408	10	819	190	1,427
1928	425	11	893	173	1,502
1929	376	11	990	216	1,593
1930	410	4	1,038	262	1,714
1931	413	6	937	205	1,561
1932	361	7	736	197	1,301
1933	383	1	924	197	1,505
1934	384	5	889	210	1,488
1935	282	2	594	201	1,079
1936	202	1	668	174	1,045
1937	167	5	589	291	1,052
1938	174	7	535	276	992
1939	127	3	502	228	860
1940	106	6	397	193	702
1941	141	5	407	231	784
1942	189	11	421	270	891
1943	206	6	363	567	1,142

In the following tables information relating to the examination and treatment of patients undertaken at the Clinics at Pontypridd, Port Talbot, and Barry is given.

PATIENTS TREATED AT CLINICS, 1943.

PONTYPRIDD.															
			Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
			M.	F.	Total	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	
New cases	..	..	28	29	57	—	—	—	71	25	96	185	106	291	444
Patients discharged after completion of treatment			1	2	3	—	—	—	32	5	37	180	98	278	318
Patients who ceased to attend Clinic before completion of treatment	..	..	19	16	35	—	—	—	40	15	55	—	—	—	90
Total number of attendances of patients at the Clinic			1,734	1,199	2,933	—	—	—	1,105	356	1,461	194	108	302	4,696

PORT TALBOT.

PORT TALBOT.															
			Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
			M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	
New cases	..	..	28	15	43	3	—	3	82	35	117	43	38	81	244
Patients discharged after completion of treatment			11	5	16	1	—	1	56	25	81	43	38	81	179
Patients who ceased to attend Clinic before completion of treatment	..	..	14	10	24	—	—	—	37	8	45	—	—	—	69
Total number of attendances of patients at the Clinic	..		1,009	742	1,751	5	—	5	919	363	1,282	69	51	120	3,158

BARRY.

	Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	
New cases	10	9	19	3	—	3	58	17	75	25	37	62	159
Patients discharged after completion of treatment	4	5	9	—	—	—	15	8	23	25	37	62	94
Patients who ceased to attend Clinic before completion of treatment	1	12	13	—	—	—	6	5	11	—	—	—	24
Total number of attendances of patients at the Clinic..	658	607	1,265	7	—	7	501	129	630	51	55	106	2,008

The following tables give information relating to the examination and treatment of patients residing in the Administrative County of Glamorgan undertaken at the Cardiff Royal Infirmary and the Swansea General and Eye Hospital.

CARDIFF ROYAL INFIRMARY.

	Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	
New cases	21	15	36	—	—	—	17	15	32	54	39	93	161
Patients discharged after completion of treatment	4	7	11	—	—	—	7	8	15	54	39	93	119
Patients who ceased to attend Clinic before completion of treatment	21	10	31	—	—	—	14	16	30	—	—	—	61
Total number of attendances of patients at the Clinic ..	415	714	1,129	—	—	—	246	225	471	111	142	253	1,853
Aggregate number of "In-patient days"	—	—	—	—	—	—	—	—	—	—	—	—	—

SWANSEA GENERAL AND EYE HOSPITAL.

	Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	
New cases	27	24	51	—	—	—	36	7	43	42	22	64	158
Patients discharged after completion of treatment	1	—	1	1	—	1	19	4	23	27	13	40	65
Patients who ceased to attend Clinic before completion of treatment	16	13	29	17	10	27	—	—	—	—	—	—	56
Total number of attendances of patients at the Clinic ..	744	458	1,202	—	—	—	593	309	902	64	34	98	2,202
Aggregate number of "In-patient days"	51	23	74	—	—	—	60	59	119	—	—	—	193

MATERNITY AND CHILD WELFARE.

During the year the District Councils in the capacity of Maternity and Child Welfare Authorities operated 122 Infant Welfare Centres, 72 Ante-natal Clinics, and 41 Post-natal Centres. There were 34 Nursery Schools.

The Diphtheria Immunisation Campaign has in most districts of the County been pursued with great energy. The amount of work to be done to gain the desired percentage of immunised children under the age of fifteen years is very substantial.

The position in the Administrative County at the end of 1943 was as follows :—

Percentage who had received immunising injections—

(a) Under 5 years of age	62·3
(b) Over 5 years of age	72·0

Thus it seems possible that the position is such that a lessening of the number of children who suffer from diphtheria can be expected.

In a return received from the Welsh Board of Health the following interesting results are seen : Between 1st July, 1943, and 31st December, 1943, there were 393 cases notified of diphtheria occurring in children under fifteen years of age. 102 occurred in children who had been immunised not less than twelve weeks before the onset of the disease. In the unimmunised group the case mortality was 2·7% and in the immunised group it was nil.

COUNTY MIDWIFERY SERVICE.

The County Midwives acting as midwives or maternity nurses attended 6,024 mothers during the year. In addition it must be remembered that 2,649 mothers were admitted to the various County Hospitals and Institutions, so that it can be readily seen what a significant part the Council plays in maternity work.

The Midwives' Salaries Committee report was published during the year and adopted by the Council. Every endeavour was immediately made to apply the conditions of service stated in the report. The number of midwives now engaged depends not only on the number of births but also on necessary arrangements to get as near to the conditions of service as laid down in the report.

The work during the year has been well done and complaint rare. Most complaints have been in relation to transport difficulties. At the end of the year transport became a little easier but this is still a long way from being satisfactory. The majority of your midwives are very keen in their vocation and are anxiously awaiting the time when adequate post-certificate courses can be introduced. Dr. Victor Allison gave a lecture to all the midwives, including those in independent practice, on "Infection," which was highly appreciated.

The arrangements with Cardiff City Council and the Cardiff and District Branch of the Queen's Institute of District Nursing for the training of pupil-midwives were continued.

The number of midwives who notified their intention to practise during the year was 208. This number included 126 whole-time salaried midwives employed by the Council.

The number of occasions on which medical aid was sought (Midwives Act, 1918, Section 14 (1)) was 2,691. The reasons for seeking medical aid were as follows :—

(1) <i>Relating to Mother.</i>		(d) Placental abnormalities ..	100
(i) Ante-natal.		(e) Post partum haemorrhage ..	97
(a) Albuminuria	134	(f) Puerperal pyrexia	146
(b) Eclampsia	2	(g) Breast conditions	16
(c) Ante partum haemorrhage ..	97	(h) Miscellaneous	63
(d) Abortions	223	(2) <i>Relating to Infant.</i>	
(ii) Natal.		(a) Neo natal distress	26
(a) Placenta praevia	5	(b) Asphyxia	16
(b) Prolonged and 2nd stage labour	667	(c) Malformations	31
(c) Abnormal presentation ..	81	(d) Eye conditions	114
(d) Miscellaneous	150	(e) Prematurity	92
(iii) Post Natal.		(f) Skin conditions	64
(a) Post-natal convulsions ..	2	Total	
(b) Albuminuria	5	2,691	
(c) Ruptured perineum	560		

The following work has been undertaken by your Officers on your behalf as a Local Supervising Authority during the year :—

Number of inspections of County Midwives	782
Number of inspections of Independent Midwives	95
Number of inspections of Midwives of Nursing Associations	53
Total number of inspections	930

The following table shows the operation of the County Midwifery Service for the year ended 31st December, 1943 :—

Cases attended.			Fees.		
As midwife.	As maternity Nurse.	Total.	Full fee paid to Midwife.	On investigation of family circumstances.	
				Whole or part fee charged.	No charge made.
5,342	*682	6,024	3,923 or 65%	1,036 or 17%	1,065 or 18%

* Includes 277 abortion cases.

NURSING HOMES.

Thirty-eight inspections were made during the year of the eight Nursing Homes registered under Section 187 of the Public Health Act, 1936.

BLIND PERSONS ACTS, 1920 AND 1938.

The total number of blind persons on the register as at 31st March, 1944, was 1,400. Of this number 1,204 or 86% are classed as unemployable and it will thus be seen that the greater part of the administration of these Acts is concerned with the granting of financial assistance to this class. During the year a further increase in the rates of assistance was granted, and the original policy of the County Council of granting the blind a higher rate of assistance than is granted to necessitous sighted persons has been maintained. Payments made to necessitous blind persons during the year ended 31st December, 1943, exceeded £46,000.

Prior to 1st November, 1943, the County Council had employed regulations of its own as a basis for the assessment of need, but from this date under the provisions of the Pensions and Determination of Needs Act, 1943, the resources of blind persons who are members of households are calculated in the same manner as is done in relation to applicants for Supplementary Pensions. This has caused an increase in the total expenditure but has the advantage of having brought about uniformity of method of assessment as between blind persons, Poor Law cases, and applicants for Supplementary Pensions.

No person is admitted to the register of blind persons until satisfactory evidence of blindness in accordance with the terms of the Act is available. Two of my Medical Officers who have specialist knowledge of eye work undertake these examinations, and the services of a consultant are called upon when necessary.

PROVISION OF TREATMENT.

A considerable amount of preventive and ameliorative treatment is undertaken by the Eye Specialists at Llwynypia, Mid-Glamorgan, and West Glamorgan Hospitals, and all persons for whom it is thought treatment might result in restoration of sight or prevention of blindness are urged to undertake operative treatment.

TRAINING AND EMPLOYMENT.

The Education Committee continues to provide training in one of the crafts practised by the blind for all blind persons thought to be suitable and in respect of whom there is a good prospect of the trainee eventually becoming self-supporting. Blind children from the County Area who attend the County School for the Blind remain at the school for their training whilst older blind persons receive their training at one of the voluntary institutions in or adjacent to the Administrative County.

During the war years journeymen and journeywomen have generally enjoyed more continuous employment than they did in times of peace, as the institutions have executed many orders in connection with the war effort.

In some institutions financial difficulties persisted and they are likely to remain particularly in those cases where voluntary collections are not so high as in others. These difficulties result in fairly frequent applications to the County Council for increased contributions and subject to scrutiny of the accounts of the institution increased payments have been made with the object of keeping the employees at work.

Regular visits are made to the unemployable by a staff of Home Visitors, which at present consists of one whole-time Visitor and six trained Nurses, who devote a portion of their time to this work. With one exception, each Home Visitor is qualified by examination to teach Braille, Moon, pastime occupations, etc., and their visits are appreciated by the large majority of the persons upon whom they call.

STATISTICAL TABLES.

The following miscellaneous statistical tables are inserted for purposes of comparison :—

BIRTHS.

		1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Administrative County ..	..	16.0	16.5	16.0	15.4	15.3	15.4	15.6	16.3	16.7	18.2	18.4
England and Wales ..	..	14.4	14.8	14.7	14.8	14.9	15.1	15.0	14.6	14.2	15.8	16.5
Illegitimate birth-rate per 1,000 births—												
Administrative County ..	..	—	—	—	—	—	32	30	29	35	34	44
England and Wales ..	..	—	—	—	—	—	42	42	43	53	54	*63

* Provisional figure.

DEATH RATE.

		1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Administrative County ..	..	12.7	11.7	12.0	12.2	12.9	12.6	13.1	13.4	12.9	12.1	12.4
England and Wales ..	..	12.3	11.8	11.7	12.1	12.4	11.6	12.1	14.3	13.2	11.6	12.1

INFANT MORTALITY.

Year.	Deaths under one year per 1,000 Births.		Year.	Deaths under one year per 1,000 Births.	
	Glamorgan	England and Wales.		Glamorgan.	England and Wales.
1904.	176	146	1929.	80	74
1914.	112	105	1930.	69	60
1916.	94	91	1931.	77	66
1917.	94	96	1932.	72	65
1918.	95	97	1933.	79	64
1919.	95	89	1934.	65	59
1920.	90	80	1935.	64	57
1921.	93	83	1936.	63	59
1922.	90	77	1937.	65	58
1923.	75	69	1938.	60	53
1924.	77	75	1939.	60	50
1925.	83	75	1940.	65	55
1926.	76	70	1941.	67	59
1927.	86	69	1942.	55	49
1928.	75	65	1943.	56	49

The position regarding infant mortality has been well maintained for the year 1943 when one considers that the rate of 55 for 1942 was the lowest recorded for the County.

SCARLET FEVER.

				1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Cases	..	..	..	1,870	2,458	3,586	1,841	2,219	3,859	3,629	1,948	1,693	1,282	1,530	1,855
Attack-rate per 1,000	..			2.45	3.24	4.77	2.47	3.03	5.40	5.12	2.74	2.36	1.73	2.14	2.66
Hospital Cases	..	..		1,413	1,834	2,489	1,358	1,387	1,697	2,182	1,406	999	830	1,160	1,440
Deaths	..	..	..	9	15	22	11	11	7	16	10	5	4	2	3
Death-rate per 1,000	..			0.01	0.02	0.03	0.01	0.01	0.01	0.02	0.01	0.01	0.01	0.003	0.004
England and Wales—															
Death-rate per 1,000				0.01	0.02	0.02	0.01	0.01	0.01	0.01	0.01	0.00	0.00	0.00	0.00

There was an increase in the notifications of scarlet fever. The disease appears to have been fairly mild. There were 3 deaths out of a total of 1,855 notified cases. The number admitted to hospital was 1,440. This is a high percentage in view of the tendency not to admit such cases to hospital except to prevent the spread of infection, particularly when the patient or the contacts are related to such things as milk production.

DIPHTHERIA (INCLUDING MEMBRANOUS CROUP).

				1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Cases	..	..	..	1,088	1,068	1,463	1,300	1,133	1,463	2,017	1,958	2,572	2,182	1,373	1,049
Attack-rate per 1,000	..			1.43	1.41	1.95	1.75	1.55	2.05	2.85	2.75	3.59	2.95	1.92	1.50
Hospital cases	..	..	..	811	881	1,229	1,078	919	1,074	1,659	1,716	2,436	1,938	1,309	1,013
Deaths	..	..	..	63	69	129	83	53	49	64	62	98	83	48	24
Death-rate per 1,000	..			0.08	0.09	0.17	0.11	0.07	0.07	0.09	0.09	0.14	0.11	0.07	0.03
England and Wales—															
Death-rate per 1,000				0.06	0.06	0.10	0.08	0.07	0.07	0.07	0.05	0.06	0.07	0.05	0.03

Some remarks about immunisation against diphtheria are given previously in the Report.

It will be seen that there are over 300 less cases this year as compared with 1942, but perhaps of greater importance was the reduction in the mortality rate. The number of patients admitted to hospital was creditably high.

In certain districts the type of the disease was of a fairly toxic nature.

MEASLES.

	1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Deaths	9	85	30	42	9	41	14	22	18	46	6	23
Death-rate per 1,000 ..	0·01	0·11	0·04	0·06	0·01	0·06	0·02	0·03	0·03	0·06	0·01	0·03
England and Wales.—												
Death-rate per 1,000	0·08	0·05	0·09	0·03	0·07	0·02	0·04	0·01	0·02	0·03	0·01	0·02

WHOOPING COUGH.

	1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Deaths	50	68	18	29	55	29	26	27	13	46	15	20
Death-rate per 1,000 ..	0·06	0·09	0·02	0·04	0·07	0·04	0·04	0·04	0·02	0·06	0·02	0·03
England and Wales.—												
Death-rate per 1,000	0·07	0·05	0·05	0·04	0·05	0·04	0·03	0·03	0·02	0·06	0·02	0·03

ENTERIC FEVER (INCLUDING PARATYPHOID).

Year.	Administrative County of Glamorgan.				England and Wales.
	Cases.	Attack-rate per 1,000.	Deaths.	Death-rate per 1,000.	Death-rate per 1,000.
1899.	1,487	2·41	215	0·34	0·19
1904.	825	1·27	194	0·39	0·23
1914.	110	0·14	28	0·03	0·05
1927.	23	0·03	4	0·005	0·01
1928.	24	0·03	2	0·002	0·01
1929.	19	0·02	2	0·002	0·01
1930.	33	0·04	3	0·004	0·01
1931.	20	0·03	4	0·005	0·01
1932.	7	0·01	1	0·001	0·01
1933.	15	0·02	1	0·001	0·01
1934.	11	0·01	2	0·002	0·00
1935.	21	0·03	2	0·003	0·00
1936.	38	0·05	4	0·005	0·00
1937.	37	0·05	4	0·006	0·00
1938.	10	0·01	1	0·001	0·00
1939.	41	0·06	1	0·001	0·00
1940.	15	0·02	1	0·001	0·00
1941.	66	0·09	4	0·005	0·00
1942.	12	0·02	—	—	0·00
1943.	12	0·02	—	—	0·00

DIARRHOEA AND ENTERITIS (INFANTS UNDER 2 YEARS).

	1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Deaths	58	75	48	54	53	37	36	40	51	55	65	56
Death-rate per 1,000 births	4.6	6.2	3.9	4.5	4.7	3.38	3.30	3.59	4.29	4.33	4.91	4.37
England and Wales—												
Death-rate per 1,000 births	6.6	7.1	5.5	5.7	5.9	5.8	5.5	4.6	4.6	5.1	5.20	5.30

TUBERCULOSIS.

TABLE I.

				1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	
Cases notified—																
Phthisis				1,080	896	1,055	868	838	828	842	844	975	933	934	991	
Other Tuberculous diseases				394	367	412	315	314	320	345	310	332	355	322	356	
Deaths—																
Phthisis				577	631	594	536	503	513	491	469	477	492	447	468	
Other Tuberculous diseases				135	139	135	128	107	106	105	83	119	107	94	105	
Case Mortality per cent—																
Phthisis				53.4	70.4	56.3	61.7	60.2	61.9	58.3	55.7	48.9	52.7	47.9	47.2	
Other Tuberculous diseases				34.3	37.9	32.8	40.6	34.1	33.1	30.4	26.8	35.8	30.1	29.2	29.4	
Death-rate per 1,000.	Administrative County—															
	Phthisis.. .. .				0.76	0.83	0.79	0.72	0.69	0.72	0.69	0.66	0.67	0.66	0.63	0.67
	Other Tuberculous diseases				0.18	0.18	0.18	0.17	0.15	0.15	0.15	0.12	0.17	0.14	0.13	0.15
	Urban Districts—															
	Phthisis.. .. .				0.77	0.88	0.82	0.77	0.75	0.75	0.73	0.74	0.70	0.71	0.68	0.74
	Other Tuberculous diseases				0.19	0.19	0.20	0.17	0.15	0.15	0.16	0.14	0.18	0.15	0.13	0.15
	Rural Districts—															
	Phthisis.. .. .				0.71	0.69	0.68	0.56	0.50	0.63	0.59	0.42	0.57	0.54	0.48	0.49
	Other Tuberculous diseases				0.14	0.17	0.12	0.18	0.13	0.13	0.10	0.05	0.12	0.12	0.12	0.14
	England and Wales—															
	Phthisis				0.69	0.69	0.63	0.60	0.58	0.58	0.53	0.53	0.58	0.60	0.54	0.56
	Other Tuberculous diseases				0.15	0.13	0.13	0.11	0.11	0.11	0.10	0.10	0.11	0.12	0.11	0.11

TABLE II.—NOTIFICATION OF TUBERCULOSIS.

Year.	Number of Notifications.			Rate per 1,000 population.		
	Pulmonary.	Non-pulmonary.	Total.	Pulmonary.	Non-pulmonary.	Total.
1942	934	322	1,256	1.31	0.45	1.76
1943	991	356	1,347	1.42	0.51	1.93

TABLE III.—NOTIFICATIONS OF NON-PULMONARY TUBERCULOSIS.

Year.	Rate per 1,000 population.
1938	0·48
1939	0·44
1940	0·46
1941	0·48
1942	0·45
1943	0·51

The notifications of, and deaths from, tuberculosis show an increase over 1942. The England and Wales figures show a similar increase in the pulmonary form. It is almost certain that notifications are increasing throughout the country, but one cannot accept this in itself as indicating that there is an increased incidence. One reason for stating this is the modern developments in diagnosis. The number of deaths from tuberculosis (all forms) in 1943 was 573, an increase of 32. The death rate per 1,000 population increased from 0·76 in 1942 to 0·82 in 1943. It is too early from the figures to make any prophecy but one is apprehensive that it may foretell the expected war-time increase which up to now has not shown itself.

The Welsh National Memorial Association is taking all steps in difficult circumstances to increase the bed accommodation for tuberculous patients.

AFTER-CARE.

In April, 1943, the Government issued a scheme for financial grants to tuberculous patients (Circular 2794 and Memo. 266/T). This scheme provides for assisting persons who give up work on the advice of the Tuberculosis Officer. The purpose is to place the breadwinner in a position that his family is cared for when he is under treatment and off work. It is essential for the purposes of the scheme that there is reasonable hope that treatment will restore the patient to health and work. There is a great responsibility placed on the Tuberculosis Officer and one which can disturb the doctor-patient relationship. The Government Scheme is limited—it does not assist the patient suffering from chronic pulmonary or non-pulmonary tuberculosis. Payments are divided into (a) maintenance allowance, (b) discretionary payments, and (c) special payments.

The Council decided that this scheme should be administered by the Public Health Committee and the scheme was in operation by August of this year (1943). Two Investigating Officers were appointed and the necessary clerical staff. As far as the limits of the scheme will allow the arrangements have worked smoothly.

Below is given the statistics relating to the scheme up to the end of the year :—

Number of persons who applied for allowances		814
Number granted allowances from August to December, 1943		465 or 57%
Number receiving assistance at December, 1943		317 or 39%
Number of cases under care of Public Assistance Committee before operation of scheme		150
Number of above transferred to Government Scheme		16

The Committee considered an After-care Scheme under Section 173 (2) of the Public Health Act, 1936, and having the desire to treat all tuberculous patients on equality with the Government Scheme took all steps to gain information if this could be done under this Section of the Act. At the end of the year consideration was still being given to a County After-care Scheme, which will almost certainly be introduced in some form or another during the coming year.

MATERNAL MORTALITY.

PUERPERAL SEPSIS.

	1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Deaths	33	30	48	37	29	17	15	15	14	14	14	19
Death-rate per 1,000 births	2.63	2.48	3.88	3.10	3.57	1.55	1.37	1.35	1.18	1.10	1.07	1.43
England and Wales—												
Death-rate per 1,000 births	1.61	1.79	2.03	1.68	1.40	0.97	0.89	0.77	~~0.52~~ 0.52	0.48	0.42	0.73

OTHER MATERNAL CAUSES.

	1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.
Deaths	68	53	52	47	35	36	50	43	37	36	32	43
Death-rate per 1,000 births	5.42	4.38	4.20	3.94	3.10	3.29	4.58	3.86	3.11	2.83	2.45	3.24
England and Wales—												
Death-rate per 1,000 births	2.63	2.63	2.57	2.42	2.41	2.26	2.19	2.16	~~1.64~~ 1.64	1.75	1.59	1.56

The rates for 1943 are worked out on "live and still births" and not on "live" births as previously.

The maternal mortality rate in 1942 was the lowest recorded but it was stated in last year's Report that "the rates may swing a little." Unfortunately, this has proved only too true and the rate increased in 1943 to 4.67 from 3.52. A fairly detailed enquiry was made into each death and the following tentative conclusions were come to :—

Puerperal sepsis, the deaths from which are classified in one group, was responsible for 19 deaths as compared with 14 in the previous year, 8 being the result of sepsis following abortion. Abortion, therefore, accounts for a high proportion of the deaths from sepsis. Two were the outcome of self-inflicted interference with pregnancy, and the possibility of at least a part of the remainder arising from the same cause cannot be ruled out.

Coupled with four further deaths not the result of sepsis, abortion was responsible for 19% of the total maternal death rate. It is impossible to correctly assess how many abortions occur as pregnancy is not notifiable, but the number admitted to hospital shows no increase, nor are the County Midwives called in to attend such cases more frequently than hitherto. This may not, however, present a true picture as it is probable that many are attended by general practitioners and I have no information concerning them.

The value of sulphonilamide drugs in the control of sepsis has been proved, particularly when used early in the infection, often not possible in the woman suffering from post-abortive sepsis owing to the delay in seeking medical attention.

It is disappointing to find that a further 8 deaths were due to embolism (7 pulmonary and 1 cerebral), which so often occurs many days after delivery when the puerperal infection has been brought under control.

The classification "other puerperal causes" also shows an increase, and this is largely the outcome of an increase in the severer manifestations of toxæmia and deaths from hæmorrhage.

The 17 deaths attributed to toxæmia are made up as follows: Eclampsia 12, Necrosis of Liver 2, Necrosis of Kidney 1, Hyperemesis 1, Uraemia 1. In a further 8 cases toxæmia was a contributory factor but not the immediate cause of death.

The etiology of toxæmia of pregnancy is obscure but a high protein diet is considered detrimental. The rationing of meat and eggs in war time should, therefore, bring about a lowered incidence and during the last war there was such a decrease.

One factor however looms large not only in this but also in other causes of maternal death, and that is the inability of the expectant mother to take adequate rest when advised to do so. It is almost impossible to obtain help in the home while the mother is confined to bed for treatment, often protracted, of a condition such as albuminuria with a raised blood pressure for which rest is essential. In several cases investigated, advice given at the ante-natal clinic has not been followed for this reason, with fatal consequences.

Regular ante-natal supervision, whether at a clinic or by the patient's own doctor or midwife, is an important measure in the early detection of abnormalities of pregnancy, and therefore it is regrettable that in almost 50% of the maternal deaths no ante-natal supervision was received, and seven of the toxæmia cases referred to above did not have such attention, despite the fact that ante-natal clinics have been set up by all the welfare authorities.

Hæmorrhage was a primary cause of death in 11 cases, 4 of this number being post-partum, but a further seven cases died following manual removal of the placenta. It has been reported by several County Midwives that they have noticed in their practices a greater tendency to hæmorrhage even following normal delivery. This aspect is being further investigated.

Hospital facilities for complicated cases of pregnancy and labour are always available, and while a proportion of the 48 cases dying in hospital were admitted prior to the onset of labour a number were received when dangerously ill, and for whom very little could be done. It is of interest to note that blood transfusion is made use of to a greater extent than ever before, in the treatment of obstetric shock and hæmorrhage associated with delivery.

The journey to hospital of dangerously ill cases often adds to the shock from which they are suffering, particularly where hæmorrhage is a feature, and the use of a "Flying Squad," consisting of a doctor and a midwife, to attend at the home to give emergency treatment, which is a development in certain parts of the country, has decided advantages, but one which it is not possible to institute at the present time.

The general health of the mothers has not shown any marked deterioration as far as can be made out. In four of the deaths, conditions not the result of pregnancy contributed largely to the fatal issue.

GENERAL.

The conditions of cleanliness and skin infections tended to improve. Most of the District Councils have cleansing centres for dealing with scabies.

Pemphigus in infants has, if anything, decreased but still appears in hospital and domiciliary practice. Its relative mildness has been maintained and no deviation in health of the infants suffering from it has been apparent.

Cerebrospinal fever showed a decreased incidence—96 notifications and 13 deaths in 1943 as against 189 notifications and 35 deaths in 1942.

There was no increase in any of the non-infectious diseases worthy of comment.

Cancer deaths remained as in 1942. There was some variation in the sites of the disease which is worthy of note :—

Site.	1942.	1943.
Buccal Cavity }	143	123
Oesophagus Uterus }		
Stomach and Duodenum	262	295
Breast	95	90
Other Sites	580	572
Total	1,080	1,080

This indicates that there was some decrease in the number of deaths in all sites except one, namely, the stomach and duodenum, where the increase neutralised all the other decreases. Cancer caused nearly double the number of deaths than did tuberculosis.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE ADMINISTRATIVE COUNTY
OF GLAMORGAN DURING THE YEAR 1943.

Causes of Death.	0-1 year		1-5 years		5-15 years		15-45 years		45-65 years		65 years and upward		All ages		Totals
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Typhoid and Paratyphoid Fevers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	1	1	2	1	1	1	1	4	1	—	—	—	6	7	13
Scarlet Fever	—	—	2	—	—	—	—	—	1	—	—	—	3	—	3
Whooping Cough	3	6	1	8	2	—	—	—	—	—	—	—	6	14	20
Diphtheria	3	—	4	6	4	4	1	—	—	2	—	—	12	12	24
Tuberculosis of respiratory system	—	1	1	1	3	7	140	169	106	23	13	4	263	205	468
Other Forms of Tuberculosis ..	4	3	13	8	7	9	26	21	7	4	2	1	59	46	105
Syphilitic Diseases	2	1	1	—	—	—	2	1	18	3	11	3	34	8	42
Influenza	2	2	1	1	1	2	6	10	52	19	65	42	127	76	203
Measles	3	6	6	5	1	2	—	—	—	—	—	—	10	13	23
Ac. Polio-myel. and Polio-enceph.	—	—	—	—	1	—	—	—	—	—	—	—	1	—	1
Acute Inf. Encephalitis	—	—	—	—	—	—	3	—	—	1	—	—	3	1	4
Cancer of Buc. Cav. and Oesoph. (M) Uterus (F)	—	—	—	—	—	—	2	7	16	44	35	19	53	70	123
Cancer of Stomach and Duodenum	—	—	—	—	—	—	8	2	71	44	95	75	174	121	295
Cancer of Breast	—	—	—	—	—	—	—	9	—	48	3	30	3	87	90
Cancer of all other sites	—	—	—	1	1	—	23	16	151	107	164	109	339	233	572
Diabetes	—	—	—	—	1	—	2	4	9	16	11	36	23	56	79
Intra-Cranial Vascular Lesions ..	—	1	1	—	—	—	8	4	109	119	308	316	426	440	866
Heart Disease	—	—	—	—	3	6	70	71	310	216	687	585	1070	878	1948
Other Diseases of Circ. System ..	1	1	—	—	—	—	2	1	35	11	63	59	101	72	173
Bronchitis	27	22	3	4	2	2	18	8	148	51	228	135	426	222	648
Pneumonia	49	49	16	14	1	3	20	13	56	18	45	40	187	137	324
Other Respiratory Diseases ..	1	1	1	2	—	1	24	9	107	13	43	19	176	45	221
Ulcer of Stomach or Duodenum ..	—	—	—	—	—	—	10	2	42	3	13	1	65	6	71
Diarrhoea, under two years ..	35	19	1	1	—	—	—	—	—	—	—	—	36	20	56
Appendicitis	—	—	2	—	4	5	7	8	5	5	4	3	22	21	43
Other Digestive Diseases ..	14	6	1	2	5	1	11	10	38	29	33	38	102	86	188
Nephritis	—	1	—	—	2	3	14	21	35	31	67	62	118	118	236
Puerperal and Post-Abort: Sepsis	—	—	—	—	—	—	—	19	—	—	—	—	—	19	19
Other Maternal Causes	—	—	—	—	—	—	—	43	—	—	—	—	—	43	43
Premature Birth	99	80	—	—	—	—	—	—	—	—	—	—	99	80	179
Con. Mal. Birth Inj. Infant Dis.	111	83	3	2	2	1	7	3	—	—	—	—	123	89	212
Suicide	—	—	—	—	—	—	13	7	13	11	8	3	34	21	55
Road Traffic Accidents	—	—	6	6	11	3	12	3	11	2	11	1	51	15	66
Other Violent Causes	8	12	13	6	13	4	82	10	62	5	36	24	214	61	275
All Other Causes	36	25	8	6	15	11	45	68	85	80	335	277	524	467	991
All Causes	399	320	86	74	80	65	557	543	1488	905	2280	1882	4890	3789	8679

1943.

NOTIFICATION OF INFECTIOUS DISEASES.

	SMALLPOX.			SCARLET FEVER.			DIPHThERIA. (Includes Mem. Cronp.)			ENTERIC FEVER.		PARA- TYPHOID.		ERYSIPELAS.		PULMONARY TUBERC'LOSIS		NON- PULMONARY TUBERC'LOSIS		PUERPERAL PYREXIA.		Ophthalmia Neonatorum	PNEUMONIA.		MEASLES		WHOOPIING COUGH		Encephalitis Lethargica	Dysentery.	Cerebro-Spinal Fever	Malaria.	Acute Polionyelitis	Membranous Croup.
	Cases	Rate	Hos- pital	Cases	Rate	Hos- pital	Cases	Rate	Hos- pital	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate per 1,000 Births		Cases	Rate	Cases	Rate	Cases	Rate						
Administrative County	..	..	..	1855	2.66	1440	1049	1.50	1013	4	0.005	8	0.01	158	0.23	991	1.42	356	0.51	92	7.18	60	919	1.32	9747	13.98	846	1.21	6	34	96	9	11	—
Urban Districts	..	..	..	1393	2.72	1064	666	1.30	623	2	0.004	8	0.02	127	0.25	752	1.47	257	0.50	70	7.44	53	794	1.55	7864	15.35	612	1.19	6	31	68	5	11	—
Rural Districts	..	..	..	462	2.50	356	383	2.07	390	2	0.01	—	—	31	0.17	239	1.29	89	0.48	22	6.49	7	125	0.68	1883	10.19	234	1.32	—	3	28	4	—	—
URBAN.																																		
Aberdare	..	..	..	86	2.13	19	24	0.59	23	1	0.02	2	0.05	19	0.47	78	1.93	22	0.54	4	6.35	—	118	2.92	843	20.88	109	2.70	3	2	—	—	1	—
Barry Borough	..	..	..	183	5.01	158	25	0.68	25	—	—	—	—	8	0.22	40	1.09	11	0.30	2	2.69	—	18	0.49	368	10.07	12	0.33	—	1	1	—	1	—
Bridgend..	..	..	..	17	1.42	14	2	0.17	2	—	—	—	—	4	0.33	14	1.17	15	1.25	1	4.98	—	2	0.17	141	11.78	—	—	—	1	1	—	—	—
Caerphilly	..	..	..	64	1.94	49	74	2.25	61	—	—	—	—	10	0.30	56	1.70	28	0.85	2	2.95	4	44	1.34	626	19.01	71	2.16	—	3	2	—	—	—
Cowbridge Borough	..	..	..	4	3.24	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	0.81	3	2.43	—	—	—	—	—	—	—	—	—
Gelligaer	..	..	..	33	0.94	13	14	0.40	20	—	—	3	0.08	9	0.26	58	1.65	20	0.57	5	6.44	7	33	0.93	787	22.33	92	2.61	—	—	3	—	5	—
Glyncorrwg	..	..	..	8	0.92	—	8	0.92	—	—	—	—	—	4	0.46	20	2.30	3	0.34	1	4.95	—	14	1.61	103	11.84	—	—	—	—	—	—	—	—
Llŵchwr	..	..	..	72	2.96	70	2	0.08	2	—	—	—	—	3	0.12	24	0.99	18	0.74	4	9.09	—	11	0.45	98	4.02	7	0.29	—	—	4	—	—	—
Maesteg..	..	..	..	53	2.38	47	58	2.60	55	—	—	1	0.04	4	0.18	27	1.21	14	0.63	—	—	1	43	1.93	377	16.91	5	0.22	—	—	5	—	—	—
Mountain Ash	..	..	..	142	4.43	108	48	1.50	44	—	—	—	—	8	0.25	51	1.59	10	0.31	7	12.05	2	60	1.87	731	22.81	17	0.53	—	6	1	—	—	—
Neath Borough	..	..	..	66	2.25	2	30	1.02	1	—	—	—	—	3	0.10	58	1.97	16	0.54	1	2.35	—	13	0.44	53	1.80	18	0.61	—	—	2	—	—	—
Ogmore and Garw	..	..	..	67	2.86	47	103	4.40	103	—	—	—	—	6	0.26	30	1.28	16	0.68	5	10.33	3	54	2.31	444	18.96	120	5.13	—	—	4	1	—	—
Penarth..	..	..	..	27	1.76	18	4	0.26	6	1	0.07	—	—	2	0.13	9	0.59	3	0.20	2	7.52	5	138	9.01	237	15.47	2	0.01	—	2	7	4	1	—
Pontypridd	..	..	..	122	3.23	120	41	1.09	40	—	—	1	0.03	6	0.16	72	1.91	16	0.42	21	30.00	9	31	0.82	395	10.46	21	0.56	—	—	3	—	—	—
Porthcawl	..	..	..	34	3.81	30	19	2.13	19	—	—	—	—	1	0.11	12	1.35	9	1.01	—	—	3	—	—	79	8.86	36	4.04	—	—	2	—	—	—
Port Talbot Borough	..	..	..	97	2.52	93	138	3.59	139	—	—	1	0.03	3	0.08	78	2.03	18	0.47	3	4.26	—	5	0.13	274	7.13	9	0.23	2	—	8	—	1	—
Rhondda	..	..	..	318	2.80	273	76	0.67	83	—	—	—	—	37	0.33	125	1.10	48	0.42	12	6.13	19	209	1.84	2305	20.31	93	0.82	1	16	25	—	2	—
RURAL.																																		
Cardiff	..	..	..	93	2.74	74	20	0.59	21	—	—	—	—	6	0.18	38	1.12	9	0.27	4	6.96	—	11	0.32	271	7.99	23	0.68	—	3	2	—	—	—
Cowbridge	..	..	..	34	2.78	28	23	1.88	23	1	0.08	—	—	—	—	16	1.31	6	0.49	2	7.27	1	5	0.41	211	17.25	29	2.37	—	—	—	—	—	—
Gower	..	..	..	3	0.26	3	6	0.52	2	—	—	—	—	—	—	3	0.26	5	0.43	—	—	—	2	0.17	4	0.35	—	—	—	—	1	2	—	—
Llantrisant and Llan- twit Fardre	..	..	..	79	3.34	62	80	3.38	89	1	0.09	—	—	5	0.21	25	1.06	10	0.42	5	10.96	3	12	0.51	255	10.78	8	0.34	—	—	2	1	—	—
Neath	..	..	..	64	1.63	56	124	3.16	130	—	—	—	—	7	0.18	75	1.91	17	0.43	3	4.30	2	60	1.53	274	6.98	141	3.59	—	—	1	—	—	—
Penybont	..	..	..	43	1.31	36	55	1.68	53	—	—	—	—	6	0.18	40	1.22	33	1.01	5	7.84	1	12	0.37	232	7.08	5	0.15	—	—	2	1	—	—
Pontardawe	..	..	..	146	4.63	97	75	2.38	72	—	—	—	—	7	0.22	42	1.33	9	0.29	3	5.33	—	23	0.73	636	20.16	28	0.89	—	—	20	—	—	—

VITAL STATISTICS, ETC., 1943.

	BIRTHS			DEATHS				CAUSES OF DEATH AT ALL AGES																													
	Males	Females	Total	Stillbirths	Males	Females	Total	Under one Year	Typhoid and Paratyphoid Fevers	Cerebro-Spinal Fever	Scarlet Fever	Whooping Cough	Diphtheria	Tuberculosis of Respiratory System	Other Forms of Tuberculosis	Syphilitic Diseases	Influenza	Measles	Acute Polio-Myel. and Polio-Enceph.	Acute Inf. Encephalitis	Cancer of B. Cavity and Oesoph. (M) Uterus (F)	Cancer of Stomach and Duodenum	Cancer of Breast	Cancer of all Other Sites	Diabetes	Intra-Cran. Vasc. Lesions	Heart Disease	Other Diseases of Circ. System	Bronchitis	Pneumonia	Other Respiratory Diseases	Ulcer. of Stomach or Duodenum	Diarrhoea (under 2 years)	Appendicitis	Other Digestive Diseases	Nephritis	
England and Wales	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Administrative County	6,553	6,251	12,804	458	4,890	3,789	8,679	719	—	13	3	20	24	468	105	42	203	23	—	4	123	295	90	572	79	866	1,948	173	648	324	221	71	56	43	188	236	
Urban Districts	4,828	4,585	9,413	355	3,734	2,875	6,609	541	—	9	3	18	15	377	79	33	166	22	—	3	91	225	72	420	46	675	1,499	121	525	237	157	56	49	33	139	165	
Rural Districts	1,725	1,666	3,391	103	1,156	914	2,070	178	—	4	—	2	9	91	26	9	37	1	1	1	32	70	18	152	33	191	449	52	123	87	64	15	7	10	49	71	
URBAN.																																					
Aberdare	322	308	630	16	330	250	580	28	—	—	—	1	—	26	4	3	32	—	—	—	5	21	5	35	5	78	153	7	24	10	21	7	2	—	9	10	
Barry Borough	380	363	743	23	239	193	432	30	—	—	2	2	—	29	4	7	6	3	—	—	9	8	6	31	5	51	88	6	26	19	11	4	3	5	11	11	
Bridgend	94	107	201	9	70	64	134	7	—	—	—	—	—	7	1	—	2	—	—	—	4	3	3	14	2	16	34	3	4	6	2	—	1	1	3	2	
Caerphilly	354	325	679	29	262	183	445	51	—	3	—	—	1	23	7	2	3	1	—	—	7	19	5	30	4	29	91	12	27	20	8	2	2	1	9	6	
Cowbridge Borough	11	10	21	2	10	7	17	1	—	—	—	—	—	2	—	—	—	—	—	—	1	—	—	—	—	—	2	4	—	2	—	—	—	—	1	1	
Gelligaer	409	368	777	27	234	193	427	60	—	—	—	3	1	22	9	—	14	4	—	—	4	7	3	23	1	47	70	7	35	26	12	3	11	—	10	8	
Glyncorrwg	94	108	202	6	55	43	98	9	—	—	—	1	—	9	2	—	5	1	—	—	—	1	—	—	6	—	10	17	3	10	6	—	—	—	4	3	
Llwchwr	248	192	440	13	155	124	279	18	—	2	—	—	—	18	—	5	3	—	—	—	—	2	10	1	26	3	23	63	4	25	14	6	5	3	—	7	
Maesteg	230	213	443	19	155	132	287	36	—	1	—	1	2	19	6	—	2	—	—	—	—	1	15	3	23	4	20	62	5	37	18	8	2	4	2	6	
Mountain Ash	275	306	581	23	250	189	439	27	—	1	—	1	2	30	3	1	8	3	—	—	—	3	18	8	26	3	44	102	4	63	13	7	1	2	3	6	
Neath Borough	221	205	426	20	192	165	357	30	—	—	—	6	—	29	7	1	9	—	—	—	8	14	7	16	4	32	67	6	20	14	9	1	3	1	8	10	
Ogmore and Garw	249	235	484	23	148	123	271	26	—	—	—	—	—	15	6	1	2	—	—	—	4	13	3	17	1	24	69	2	24	7	5	1	1	1	10	5	
Penarth	129	137	266	7	117	82	199	13	—	—	—	—	—	6	—	5	4	—	—	—	2	10	2	14	2	19	61	10	5	6	4	2	3	—	3	4	
Pontypridd	357	343	700	22	277	214	491	48	—	—	—	—	—	32	4	2	12	4	—	—	—	1	10	7	18	3	48	127	17	41	9	12	8	5	—	13	11
Porthcawl	73	84	157	1	50	59	109	9	—	1	—	—	1	4	—	—	6	—	—	—	—	4	3	—	6	2	10	31	1	3	4	—	—	—	2	—	3
Port Talbot Borough	361	344	705	30	297	209	506	41	—	1	—	1	4	32	6	1	17	—	—	—	8	25	8	39	2	50	120	5	22	25	10	5	2	8	7	20	
Rhondda	1,021	937	1,958	85	893	645	1,538	107	—	—	1	2	4	74	20	5	41	6	—	1	28	48	11	96	5	172	340	29	157	40	40	15	6	9	34	50	
RURAL.																																					
Cardiff	294	281	575	16	189	180	369	18	—	2	—	—	1	11	4	2	3	—	—	—	4	13	8	35	4	38	92	14	14	15	7	3	1	2	10	14	
Cowbridge	139	136	275	9	81	64	145	17	—	—	—	—	2	7	1	1	4	—	—	—	4	5	1	15	1	7	24	1	11	11	—	4	1	1	4	3	
Gower	95	92	187	8	83	56	139	10	—	—	—	1	—	1	1	—	5	—	—	—	1	3	—	12	2	15	28	5	7	4	2	—	—	—	3	9	
Llantrisant and Llantwit Fardre ..	243	213	456	15	150	101	251	19	—	—	—	—	2	9	2	1	4	1	—	—	7	11	1	14	5	30	52	14	21	13	2	3	—	—	2	3	
Neath	345	352	697	22	257	181	438	42	—	—	—	—	—	26	5	—	11	—	—	—	10	22	5	20	12	30	91	4	27	18	22	3	1	1	10	17	
Penybont	327	311	638	21	171	151	322	38	—	1	—	1	2	21	5	3	4	—	—	—	1	6	1	23	—	30	76	4	22	18	5	2	1	1	7	8	
Pontardawe	282	281	563	12	225	181	406	34	—	1	—	—	2	16	8	2	6	—	—	—	5	10	2	33	9	41	86	10	21	8	26	—	2	5	13	17	

[illegible]

